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**APR 07 2004**

**DATE:** April 7, 2004  
**TO:** Examiner A. Kalinowski  
**FIRM:** USPTO, Group Art Unit 3626  
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**FROM:** Jon A. Gibbons

**TOTAL NUMBER OF PAGES: 26  
(INCLUDING THIS PAGE)**

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**MESSAGE:**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**Applicant(s):** Steven GOLDSTEIN

**Serial No.:** 09/725,406

**For:** *METHOD AND SYSTEM FOR PROVIDING PRE AND  
POST OPERATIVE SUPPORT AND CARE*

**Enclosed are the following:**

Transmittal letter (1 pg.); Response With Amendment (22 pgs.); Petition for Extension of Time (1 pg.); and Revocation of Power of Attorney with New Power of Attorney, Change of Correspondence Address, Statement Under 37 CFR 3.73(b), and Signature of Assignee of Record

**Docket No.:** 29892.010000

**537-P0001**

**April 7, 2004**

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of : Atty. Docket No. 29892.010000  
 Steven GOLDSTEIN, et al. : Group Art Unit: 3626  
 Serial No. 09/725,406 : Examiner: A. Kalinowski  
 Filed: November 29, 2000 : Confirmation No. 5976  
 For: *METHOD AND SYSTEM FOR PROVIDING PRE  
 AND POST OPERATIVE SUPPORT AND CARE*

**TRANSMITTAL**

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

SIR:

Transmitted herewith is an amendment in the above-identified application, and the following:

- [X] Petition for Extension of Time; and Revocation of Power of Attorney with New Power of Attorney, Change of Correspondence Address, Statement Under 37 CFR 3.73(b), and Signature of Assignee of Record

The fee has been calculated as shown below. *(Small entity fees indicated in parentheses.)*

CLAIMS AS AMENDED						
(1)	(2)	(3)	(4)	(5)	(6)	(7)
	Claims Remaining After Amendment		Highest Number Previously Paid For	Extra Claims	Rate	Fee
Total Claims <i>(Small Entity)</i>	32	-	44	0	18.00 <i>(9.00)</i>	0
Independent claims <i>(Small Entity)</i>	6	-	9	0	86.00 <i>(43.00)</i>	0
Multiple Dependent <i>(Small Entity)</i>	0	-	0	0	290.00 <i>(145.00)</i>	0
Extension of Time Fee <i>(Small Entity)</i>	One Month \$110 <i>(\$55)</i>	Two Months \$420 <i>(\$210)</i>	Three Months \$950 <i>(\$475)</i>			55
Total						\$55.00


XX The Commissioner is hereby authorized to charge any required fees to Deposit Account No. 50-1556.

Respectfully submitted,

Date:

4/7/04

By:

  
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Customer No. 23334

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